

Iowa Department of Public Health Vaccines for Children Program Nonviable Vaccine Return Form

Clinic Name:				Date:		VFC PIN:
Contact:			Teleph	one:		
	vaccine is nece					rned to McKesson Specialty Distribution e vaccines, follow the instructions on
Vaccine Type	Number of Doses	NDC# (located on the vaccine box)	Lot Number	Expiration Date	Return Reason Code*	If vaccine was transferred from another clinic, indicate original clinic's name and VFC PIN.

- 1. Expired
- 2. Failure to store properly upon receipt
- 3. Mechanical Failure

- *Return Reason Codes
- 4. Natural Disaster/Power Outage
- 5. Recall
- 6. Refrigerator too cold

- 7. Refrigerator too warm
- 8. Spoiled
- 9. Vaccine spoiled in transit

Return Instructions:

- 1. Complete the Nonviable Vaccine Return Form. State the reason vaccine is nonviable (see return reason codes listed below the table) and document if the vaccines were transferred to the organization from another Iowa VFC provider by listing the original clinic name and VFC PIN.
- 2. To avoid unintentional use of expired or spoiled vaccine, remove the vaccine from the refrigerator/freezer and write "Nonviable Vaccine" on the box.
- 3. After the Nonviable Vaccine Return Form is completed:
 - a) make a copy for your records
 - b) fax a copy to the Iowa VFC Program at 1-800-831-6292, and
 - c) include the original copy of the form when returning the vaccine to McKesson Specialty Distribution.
- 4. Once this form is received and processed by the Iowa VFC Program, a UPS postage paid return label will be *emailed* to the clinic vaccine delivery contact as indicated in IRIS. If you do not typically receive UPS deliveries, contact the VFC Program for an alternate pick up process.
- 5. The unique UPS return label will be emailed from McKesson Specialty Care Distribution (pkginfo@ups.com.) The subject of the email with the return label will be titled "UPS Label Delivery, (label tracking number)."
- 6. If a return label is not received by the vaccine delivery contact within 10 days via email (check the email inbox or spam folder), contact the Iowa VFC Program.
- 7. The emailed return label will be coded with an internal tracking number used by McKesson to manage vaccine listed on the Nonviable Vaccine Return Form. Providers should NOT return additional vaccines not listed on the form. This will allow you to match the correct return label with the appropriate vaccines.
- 8. One unique return label will be included per email. Labels cannot be photocopied or reprinted for multiple uses.
- 9. If you do not use requested labels, these labels must be returned to McKesson and cannot be used for future returns. Place unused labels inside the box of nonviable vaccine to be returned to McKesson.
- 10. Expired and spoiled vaccine must be returned to McKesson within 6 months of vaccine expiration date. Open vials of vaccine are not returnable but must still be documented on this form.
- 11. Pack the vaccine to protect it from breakage. Cold packs are not necessary as the vaccine is nonviable.
- 12. Adjust vaccine inventory in IRIS consistent with the reason codes listed on the back. Detailed IRIS instructions are provided on pages 10-11 of the lowa Training-Standard User Handout found on the IRIS webpage at http://www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=Iris.